

Mississippi Office of Pollution Control  
 Lead-Based Paint Abatement/Renovation Notification

job 188165



MDEQ Use Only: <input checked="" type="checkbox"/> Email <input type="checkbox"/> Mail <input type="checkbox"/> Hand Delivery	Postmark (mail only)	Date Received <u>4/27/22</u>	AI Number
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Project Type:  Abatement    Renovation   Date of Building Construction: 1975  
 Please check all applicable boxes for the type of Notification:  Original    Revision    Cancellation    Emergency  
 Please check if asbestos notification was also submitted for this project:

**I. PROJECT/SITE INFORMATION**

Target Housing:   
 Child-Occupied Facility:   
 Physical Address Project Site: 4083 Blackjack Rd  
 City: Starkville   State: MS   Zip Code: 39759   County: Oktibbeha  
 Number of Units to be Abated/Renovated in the Building: 13

**II. BUILDING OWNER INFORMATION**

Mr./Mrs.: Patricia Lawston  
 Address of Owner: 4083 Blackjack Rd   City: Starkville   State: MS   ZIP: 39759  
 Telephone Number: (662) 251-0223

**III. ABATEMENT/RENOVATION CONTRACTOR INFORMATION**

Name of Certified Lead Abatement/Renovator Firm: Chandler Moody  
 Firm Certification Number: PBR-00011171   Telephone Number: (662) 507-5154   Exp. Date: 12/14/2022  
 Address of Certified Firm: 1691 CR 171  
 City: Blue Springs   State: MS   Zip Code: 38828

**IV. INSPECTION INFORMATION**

Name of Renovator/Inspector/Risk Assessor Conducting Inspection: \_\_\_\_\_  
 Certification Number: \_\_\_\_\_ Exp. Date: \_\_\_\_\_ Date Inspection Conducted: \_\_\_\_\_  
 Test Method Used & Manufacturer of Testing Equipment: \_\_\_\_\_  
 For Paint Chip Analysis, Name of Laboratory: \_\_\_\_\_ Certification Number: \_\_\_\_\_

**V. GENERAL CONTRACTOR (Other)**

Name of Firm: Windows USA  
 Firm Mailing Address: PO Box 222 Royal AR 71968  
 Contact Person: Mia Walsh   Telephone Number: (501) 760-0309

**VI. PROJECT DATES**

Lead Project Start: 05 / 04 / 2022   Lead Project Stop: 05 / 05 / 2022  
 Abatement/Renovation to be done during what time?  Day (5 a.m. – 5 p.m.)    Evening (5 p.m. – 8 p.m.)  
 Night (8 p.m. – 5 a.m.)    Weekend

**VII. DESCRIPTION OF PROCEDURES TO BE USED (CHECK ALL THAT APPLY)**

Wet Sanding    Component Removal    Heat Gun    Encapsulation  
 Containment    Strip and Removal    Negative Air    Enclosure  
 Other – Explain

**VIII. DESCRIPTION OF RENOVATION ACTIVITIES TO BE COMPLETED (INCLUDING COMPONENTS TO BE AFFECTED)**

Retro Fit Pocket Replacement of Existing Windows with New Vinyl Windows

**IX. WASTE TRANSPORTER**

Name: Chandler Moody

Full Mailing Address: 1691 CR 171

City: Blue Springs State: MS Zip Code: 38828

Contact: Chandler Moody Telephone Number: (662) 507-5154

**X. WASTE LEAD DISPOSAL SITE**

Site Name: \_\_\_\_\_

Physical Address: \_\_\_\_\_

Full Mailing Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

**XI. DISPOSAL SITE FOR DEBRIS OTHER THAN LEAD**

Site Name: \_\_\_\_\_

Physical Address: \_\_\_\_\_

Full Mailing Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Contact Person: \_\_\_\_\_ Telephone Number: (\_\_\_\_) \_\_\_\_\_

NOTE: All debris (other than lead) should go to an authorized Rubbish Site, or to a permitted sanitary landfill.

**XII. ABATEMENT**

A certified supervisor is required for each abatement project and shall be onsite during all work site preparation and during the post-abatement cleanup and clearance of work areas. At all other times when abatement activities are being conducted, the certified supervisor shall be onsite or available by telephone, pager, or answering service, and able to be present at the work site in no more than 2 hours.

**XIII. RENOVATION**

A certified renovator is required for each renovation project and shall be physically present when the required signs are posted, while the required work area containment is being established, and while required work area cleaning is performed. The certified renovator must regularly direct work being performed by other individuals and must be available either onsite or by telephone at all times renovations are being conducted.

**XIV. CERTIFICATION OF ACCURACY**

I certify that all of the above information is correct.

Print Chandler Moody Signature Chandler moody Date 04/27/2022

Contact information for return mail or questions concerning the information on this Notice

Mailing Address: 1691 CR 171

City: Blue Springs State: MS Zip Code: 38828

Contact: Chandler Moody Telephone Number: (662) 507-5154

Email: chandler.moody@windowsusa.com

Refer to fee schedule to calculate required notification fee. Notification fee must be submitted with notification.

MAIL TO: Mississippi Department of Environmental Quality  
Lead Notifications  
P.O. Box 2261, Jackson, MS 39225